# **HEALTHY BETHLEHEM**

# Fiscal Years 2013-2015 Strategic Plan



September 2012

# **TABLE OF CONTENTS**

### **Executive Summary**

### **Strategic Plan**

- 1. Vision
- 2. Mission
- 3. Values
- 4. Data Analysis
- 5. Strengths, Weaknesses, Threats, Opportunities
- **6. Prioritized Strategies**
- 7. Communications Strategy
- 8. 2013 Annual Plan

# **Executive Summary**

The Bethlehem Health Bureau is committed to providing high quality public health services that protect and promote the health of the residents we serve. The Bethlehem Health Bureau serves every City of Bethlehem resident and offers preventive care such as vaccines; conducts restaurant food inspections to ensure the safety of the food; provides smoking cessation programs to assist individuals with quitting smoking; conducts investigations in order to stop the spread of communicable diseases; facilitates fall prevention programs with the elderly; and prepares residents for emergency situations, among many other programs.

Healthy Bethlehem was developed to guide the planning, priorities, and decision making for the Bethlehem Health Bureau over the next three years. The Strategic Planning Committee took a comprehensive approach to creating an agency-wide strategic plan aimed at improving health outcomes, creating a more efficient organization, and providing effective public health programming.

Development of this strategic plan was based on the National Association of City and County Health Officers' (NACCHO) planning model for local health departments. Healthy Bethlehem outlines the strategic initiatives along with the objectives, tactics, and measures to achieve those goals. This strategic plan, developed in alignment with data obtained from the community health needs assessment, local health status indicators, local demographic trends, and legislative priorities, will guide the Health Bureau's efforts over the next three years.

The Bethlehem Health Bureau looks forward to working with our community partners, key stakeholders and residents in an effort to fulfill our mission and create a healthier Bethlehem.

### Bethlehem Health Bureau 2013-2015 Strategic Plan

### **Mission**

To provide high quality public health services that protect and promote optimal health and well-being to assure Bethlehem is a safe and healthy community.

### **Values**

Integrity: We act with a consistency of character, deal fairly, honestly, and transparently to the public and one another, and are accountable for our actions

Initiative: We work collaboratively with partners and seek new opportunities for positive public health outcomes

Respect: We approach all people with significance, understanding, compassion, and dignity

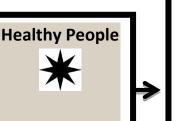
Leadership: Providing high quality and innovative services that meet the public health needs of the people we serve

### Goals



 Enable the Affordable Care Act by using a "community health navigator" approach to assist people through the health care system

**Strategic Initiatives** 



- Staff development: Create and execute professional development plan tied to the strategic plan, BHB's mission and gaps in core competencies
- Be better advocates: Facilitate, Coordinate,
   Create policies/programs, Educate
- Reduce heart disease: Develop comprehensive policies in the areas of obesity, nutrition, diabetes, physical activity, and tobacco



- Develop comprehensive approaches to Healthy Homes integrated into all BHB program areas & DCED. Expand programs through the expansion of Neighborhood Level Interventions
- Work toward Accreditation

Healthy Bethlehem

- Quality improvement: Improve key processes in all program areas in order to create greater efficiencies
- Improve data use by establishing key health indicators for each program in order to make informed decision, set priorities, and monitor the health status of the community.
- Communication: Develop a plan for social media; develop and implement marketing strategies to promote health issues, BHB services, and accomplishments for internal & external stakeholders
- Improve fiscal performance by deploying a business manager function in conjunction with DECD, creating E-document capability which will enable insurance billing, and improve tracking of invoices and receivables.

© 2012 Contin

# **Strategic Plan**

### Scope:

• City of Bethlehem

### Target customers:

- Customers
- City of Bethlehem residents
- Children and Families of BASD
- Visitors
- Homeless
- Agencies
- City Businesses
- Property Owners

### Key stakeholders:

City Administration, Board of Health, Pennsylvania Department of Health, grant funders, local hospitals, local community based organizations, Bethlehem Area School District, local colleges and universities

Time Frame: FY 2013 - 2015

Leader:

Kristen

Team Members:

Kristen Wenrich

Sherri Penchishen

Jessica Lucas

Sue Madeja

Fallon Maggio

Jose Cruz

# 1. Vision



### 2. Mission

To provide high quality public health services that protect and promote optimal health and well-being to assure Bethlehem is a safe and healthy community.

# 3. Values

### Integrity:

We act with a consistency of character, deal fairly, honestly,

and transparently to the public and one another, and are accountable for our actions

#### Initiative:

We work collaboratively with partners and seek new opportunities for positive public health outcomes

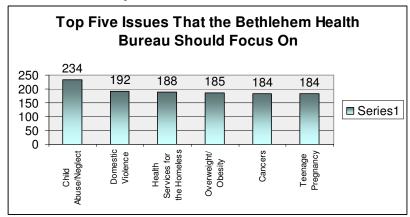
### Respect:

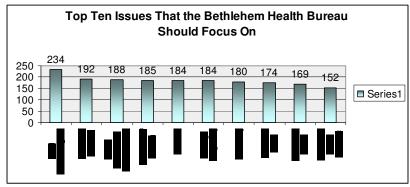
We approach all people with significance, understanding, compassion, and dignity **Leadership:** 

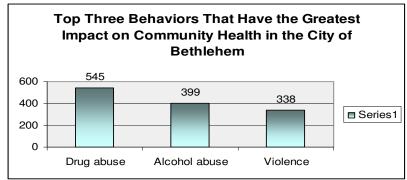
Providing high quality and innovative services that meet the public health needs of the people we serve

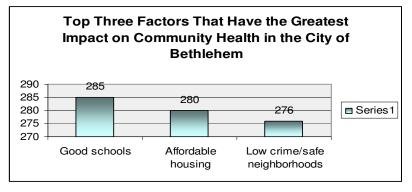
# 4. Important Data

### **Community Health Needs Assessment Data**









### **Core Competencies**

Competency	Attainable	Relevant to vision, mission, values	Differentiator?	Supported by Data?	Total
Analytical/Assessment Skills	3	3	3	3	12
Policy Development/Program Planning	3	3	3	5	14
Communication	3	3	1	5	12
Cultural Competency	3	5	3	5	16
Community Dimensions of Practice	3	5	3	3	14
Public Health Evidence Skills	3	3	3	5	14
Fiscal Planning and Management	3	1	3	1	8
Leadership and Systems Thinking	3	5	3	3	14

### **APHA Policy Gaps for 2012**

The American Public Health Association identified the following policy gaps for 2012:

- Social determinants of health and health in all policies
- The need to build capacity and strengthen the public health workforce
- Health Impact Assessments
- HIV/AIDS specifically domestic issues
- Mental health as a public health issue
- •Clean Air Act/ health impact of air pollution
- Hydraulic fracturing
- Evaluation of public health impact of energy use
- Modifications to Supplemental Nutrition Assistance Program (SNAP) benefits
- Taxes on high-calorie, low nutrient foods
- Quality improvement in public health and use of performance measures
- Integration of public health in private medical care and dental care (ie.-reimbursement, surveillance, e-records, health IT)
- Gerontological Health/Active Aging
- School-Based Health Centers

	1		Inform,	Mobilize		1	Link	Assure		
		Diagnose and	Educate,	Community	Develop		to/Provide	Competent		
Services	Monitor Health	Investigate	Empower	Partnerships	Policies	Enforce Laws	Care	Workforce	Evaluate	Research
Administrative and Supportive Services										
Accounting/Budgeting (partnering-committee, memberships)										
Personnel Administration (grant wrtintg)				Х						
Public Health Statistics (data analysis)	Х									
Public Health Education (workforce dedvelopment)			Х					Х		
Public Health Laboratory Services ((QI (inventory control, supplies))	Х	Х								
Personal Health Services										
Chronic Disease										
Healthy Woman (case management)	Х		Х				Х		Х	
Highway Safety (consulting role)	Х		Х	Х	Х	Х			Х	
Injury Prevention (education, home safety adults, child safety seats, suicide										
education)	Х	X	X	X			X		Х	
Tobacco Cessation counseling			X				X		Х	
Health Education (animal education)			X						Х	
Chronic Disease (Education (pa, nutrition, heart, osteo,										
diabetes, cancer, other)	Х		X	X	Х		Х		X	<u> </u>
Employee Wellness	Х		Χ	Х	Х		Х		Х	
Maternal and Child Health										
Perinatal postpartum depression HomeVisitation	Х	X	X	X			X		X	
Healthy Homes (blood lead testing, home inspection and education)	Х	Х	X	X			X	X	X	
Child Abuse education			X	Х				Х	Х	
Dental Health (referrals for adults and children)							Х		Х	
Vision (referrals for adults)							Х		Х	
Access to Care (COMPASS and select plan application)			Х				Х		Х	
Family planning (birth control, annual gyn exams, referrals, counseling and										
education)	Х	Х	X	X			X		Х	
Cribs for Kids (home visiting, education, crib distribution)			X	Х			Х		X	
Teen Pregnancy Testing and referral		Х	X				X		Х	
Child Death Review (data evaluation, trend analysis, education programs)	Х	Х		Х	Х				Х	
Communicable Disease Control										
Tuberculosis Control (testing, case management, treatment, home visits)	Х	Х	Х				X		Х	
STD/HIV control (testing/reporting, education, referral, surveillance, counselling,										
investigations, partner services, STD treatment, STD management)	Х	Х	X				Х		Х	
Rabies Surveillance (animal exposure investigations)	Х	Х	Х				Х		Х	
Vaccine Preventable Disease Surveillance & Imm.(investigation, education, vaccination)	x	x	Х				Х		х	
Hepatitis C (Testing, Counseling and Education)	X	X	X				X		X	
Isolation and Quarantine (enforcement)	X	X	X			Х	^		X	
Public Health Preparedness (plan development, training, education, advisory,	_ ^	^	^			^			^	
BDS, drills, call center lead, MRC)	×	x	×	x					x	
Environmental Health										
Food Protection (inspection and enforement)	Х	Х	Х			Х			Х	
Water Supply (investigation into water supply abnormalities)		X	X			X			X	
Water Pollution Control (inspection, plan review and enforecement)		X	X			X			X	
Bathing Places (inspection and enforcement)		X	X			X			X	
Vector Control (inspection and enforcement)	Х	X	X			X			X	
Solid Waste (inspection and enforcement)	_^_	X	X		Х	X			X	
Institutional Environment and Schools (inspection and enforcement)		X	X	1	^	X			X	
Recreational Env.Campgrounds,Organized Camps		X	^			X			X	
Housing Environment and Mobile Home Parks		X				X			X	
Lead Based Paint (Assessment, Abatement, enforcement)	Х	X	Х			X			X	
Responsive Services (environmental complaints, enforcement)	X	X	X		Х	X	Х		X	
Animal Control (enforcement)	X	X	X		^	X	^		X	
Animal Control (enforcement)	23/41	26/41	32/41	12/41	6/41	14/41	19/41	3/41	36/41	0/41
						1				,

# **5. SWOT ANALYSIS**

STRENGTHS	WEAKNESSES
Community dimensions	Analytical
Cultural competency	Communication
Leadership	Fiscal
Environmental (food safety, Lead, water	
quality)	Animal control process
	Solid waste and responsive services
Emergency preparation	(nuisance)
	Child neglect
	Heart disease/cholesterol
	Obesity
	Falls (>65 population)
	Low birth rate
	Nutrition (no data)
	Diabetes (no data)
	Air quality (indoor and outdoor)

OPPORTUNITIES	THREATS
Funding style changes (block grants,	
Affordable Care act)	Funding cuts expected
Citizens perception of key health issues:	
Overweight, Teen pregnancy, child abuse	Competition from other providers
	Impact of economy (no data on relationship
	to hunger, disease rates, health status)
Focus on E-billing enables additional funding	(economy expected to be flat/slightly up)
	Stray animal population appears to increase
Significant population increase in >65 segment	(no data)
Funding sources favoring integration of	
program areas particularly environmental	
Homeless population increase (no data)	
Suicide rate (no data)	

	Bethlehem Health Bureau		STRENGTHS	WEAKNESSES
	Sep-12			
	_		Community dimensions	Analytical
			Cultural competency	Communication
			Leadership	Fiscal
			quality)	Animal control process
		Ι¥Γ	Emergency preparation	Solid waste and responsive services (nuisance)
		INTERNAI		Child neglect
		Ξ		Heart disease/cholesterol
				Obesity
				Falls (>65 population)
				Low birth rate
				Nutrition (no data)
				Diabetes (no data)
				Air quality (indoor and outdoor)
	EXTERNAL			
OPPORTUNITIES	Funding style changes (block grants, Affordable Care act)  Citizens perception of key health issues: Overweight, Teen pregnancy, child abuse		#1,2 Develop comprehensive approach to Healthy Homes integrated into all BHB program areas & DCED. Expand programs through the expansion of Neighborhood Level Interventions  #3 Enable the Affordable Care Act by using a "community health navigator" approach to assist people through the health care system	#6 Improve data use by establishing key health indicators for each program in order to make informed decision, set priorities, and monitor the health status of the community. (Include the conducting of health needs assessment, timeframe)  #7 Communication: Develop a plan for social media; develop and implement marketing strategies to promote health issues, BHB services, and accomplishments for internal & external stakeholders  #8 Reduce heart disease: Develop and deploy comprehensive policies and advocacy in the areas of
Q	Focus on E-billing enables additional funding Significant population increase in >65 segment			obesity, nutrition, diabetes, physical activity, and tobacco #13 Be better advocates: Facilitate, Coordinate, Create policies/programs, Educate
	Funding sources favoring integration of program areas particularly environmental Homeless population increase (no data) Suicide rate (no data)			
	Funding cuts expected		#4 Quality improvement: Improve key processes in all program areas in order to create greater efficiencies (re-survey clients for satisfaction	#9 Improve fiscal performance by deploying a business manager function in conjunction with DECD, creating Edocument capability which will enable insurance billing, and improve tracking of invoices and receivables.
THREATS	Competition from other providers Impact of economy (no data on relationship to hunger, disease rates, health status) (economy expected to be flat/slightly up)		#5 Staff development: Create and execute professional development plan tied to the strategic plan, BHB's mission and gaps in core competencies	
	Stray animal population appears to increase (no data)			

# 6. Strategic Initiatives

#1,2 Develop comprehensive approaches to Healthy Homes integrated into all BHB program areas & DCED. Expand programs through the expansion of Neighborhood Level Interventions

#3 Enable the Affordable Care Act by using a "community health navigator" approach to assist people through the health care system

#4 Quality improvement: Improve key processes in all program areas in order to create greater efficiencies (re-survey clients for satisfaction

#5 Staff development: Create and execute professional development plan tied to the strategic plan, BHB's mission and gaps in core competencies

#6 Improve data use by establishing key health indicators for each program in order to make informed decision, set priorities, and monitor the health status of the community. (Include the conducting of health needs assessment, timeframe)

#7 Communication: Develop a plan for social media; develop and implement marketing strategies to promote health issues, BHB services, and accomplishments for internal & external stakeholders

#8 Reduce heart disease: Develop and deploy comprehensive policies and advocacy in the areas of obesity, nutrition, diabetes, physical activity, and tobacco

#9 Improve fiscal performance by deploying a business manager function in conjunction with DECD, creating E-document capability which will enable insurance billing, and improve tracking of invoices and receivables.

#13 Be better advocates: Facilitate, Coordinate, Create policies/programs, Educate

#14 Work toward Accreditation

# 7. Communications Strategy

Stakeholder	Frequency	Method	Who	Objective	Messages or Theme
ВНВ	BHB Monthly reports; select focus		KW	Keep informed and get input	Leadership Team status, key findings/decisions, what they think and how it will affect them
Customer List	once	Website at end of planning; Media, postings	KW	Inform	What BHB is about, where it is headed, we have heard you and how this will affect you
Board of Health	1 1   1   1   1   1   1   1   1   1		KW	Inform and ask for input?	Status of effort, decsisons made, request input on key partner issues
City Leadership (JK)	adership weekly 1-1 meeting		KW	Inform, request feedback, support and if required, decision	Status of effort, information required, key decisions made that he needs to make or require his validation; what when and how information need to get to Mayor and Council
Partners (eg St Lukes)	Key milestones or before final	Survey	KW	Inform and get feedback	Directions and scope; key issues that may impact the partners
City Council	Once	ce Presentation		Inform	TBD by JK

# 8. CY2013 Annual Organization Plan

# **#1 Operational Area - Quality improvement**

To: Improve key processes in all program areas in order to create greater efficiencies (re-survey clients for satisfaction)

### By:

- Each program area will select one area of focus
- Survey each program service areas for baseline
- Assess the program areas that should be surveying clients (client satisfaction surveys)
- Establish standard work for priority processes

### Measures:

- 1. Client satisfaction survey score
- 2. Decrease in complaints
- 3. Decrease rework
- 4. Number of processes documented
- 5. Avoided work
- 6. Decrease in expenditures
- 7. Increase service / \$ ratio

### Team Members:

Kristen – lead

**Program Managers** 

Entire staff

# **#2 Operational Area - Expand Healthy Homes &**

### **Neighborhood level interventions**

To: Develop comprehensive approach to Healthy Homes integrated into all BHB program areas & DCED. Expand programs through the expansion of Neighborhood Level Interventions

### By:

- Define Healthy Homes scope Neighborhood scope
- Identify 'hot' areas
- Develop standard approach
- Increase awareness & benefit for community & participants
- Train every program area
- Rating system taught
- Certification of staff
- Get internal agreement
- Secure funding

### Measures:

- 1. Number of people certified for rating system
- 2. Number of referrals (also homes)
- 3. Number & type of programs visits
- 4. Satisfaction trend
- 5. Number of site follow up improvements completed

### Team Members:

Jess - lead

# #3 Operational Area – Staff Development

To: Create and execute professional development plan tied to the strategic plan, BHB's mission and gaps in core competencies

### By:

- Complete a staff needs assessment
- Identify deficiencies
- Identify base level job requirements and needs
- Set job expectations
- Fill base gaps
- Track development
- Training, experiments, nurturing, cross training, and tracking measures

### Measures:

- 1. Needs Assessment complete
- 2. Pre vs. Post test score increase
- 3. Number of conference report outs
- 4. Number of training sessions
- 5. Number of skilled applicants on improvement
- 6. Staff satisfaction

### **Team Members:**

Fallon – lead

# #4 Operational Area – Data Management

To: Improve data use by establishing key health indicators for each program in order to make informed decision, set priorities, and monitor the health status of the community. (Include the conducting of health needs assessment, timeframe)

### By:

- Inventory partners & sources
- Inventory sources or create data stream (determine if we are a data clearing house to accumulate & publish
- Create infrastructure
- Standardize data sources
- Create comparison
- Maintain & Update data

### Measures:

- 1. Percent of program areas that are successful
- 2. Number of health indicators established per program area
- 3. Baseline measures compared to target measures for 100% of indicators

Team Members:

Kristen – lead

**Program Managers** 

# #5 Operational Area - Other

Animal Control

Objective: Transfer responsibility of animal control out of the Health Bureau.

Jess, Fallon – leads

Wellness

Objective: Incorporate wellness behavior changes for all in insurance plan (employees &

families) Sherri – lead